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**Proposed Bill No. 5208 AN ACT CONCERNING MAMMOGRAMS, BREAST
ULTRASOUNDS AND MAGNETIC RESONANCE IMAGING OF BREAST**

INSURANCE AND REAL ESTATE COMMITTEE

Public Hearing March 1, 2018

Testimony IN SUPPORT

**Representative Sean Scanlon, Senator Timothy Larson, Senator Kevin Kelly, and
Honorable Members of the Committee:**

I am a Family Psychiatric Nurse Practitioner and have been providing testimony on areas of my expertise – mental health and substance abuse – for the last 15 of the 18 years since I completed my nurse practitioner training at Yale University in 2000. I support Proposed Bill 5208 as the language in this bill compels third party payor sources to fully cover mammography and not apply this screening test to subscribers' deductibles.

This came to my awareness as I sought my own mammography through my ACA insurance. My husband and I are both self-employed. We, therefore, go 'on the marketplace' to insure our family. Thank goodness we have very little occasion to use these high deductible plans that offer minimal coverage. The plan we had for the last several years had increased by \$400 a month this year and we were compelled to seek an alternative, equally high deductible plan.

Under my current plan, I recently sought a screening mammogram. I was explicitly told they would not cover a 3-D image. I sought a 2-D facility and could find only 1 in the state; thankfully close to my home (my OBGYN believes there are only 4 in the state). The technology has advanced and not many facilities accept my insurance as their in-network rates are subpar. I *was* an in-network provider with them for the first 10 years of

my practice and never saw an increase in reimbursement therefore leaving the network 8 years ago.

In my practice last week while I was conducting a review of systems with 2 different patients, I learned of 2 different instances where both (neither with awful ACA insurance) were denied coverage for their mammograms. One was charged for her 2-D image and follow up US, her insurer denying both claims, and the second woman's mammography facility demanding payment up front (which she complied with as she has 4 first degree relatives who have died of BRCA). My OBGYN reports that many of her patients tell her more and more this is the practice – mammography facilities mandating payment up front. I will assume that is due to denial of claims.

I spoke with Ted Doolittle, our state's Health Care Advocate about this at length last week. He was kind to listen with great compassion. I want to thank my own Representative Scanlon, as well as Senators Larson and Kelly for raising Bill NO. 5208. This screening test, primarily used by women, should be some of the basic coverage offered by health insurance policies and not applied to individuals' deductibles.

Respectfully submitted,

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